

CLAIMS ONLY							Application Number 10/694,347		Filing Date			
							Applicant(s)					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	
1	1							51				
2								52				
3								53				
4								54				
5								55				
6								56				
7								57				
8								58				
9								59				
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12								62				
13								63				
14								64				
15								65				
16								66				
17	1							67				
18								68				
19								69				
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43								93				
44								94				
45								95				
46								96				
47								97				
48								98				
49								99				
50								100				
Total Indep	2							Total Indep				
Total Depend	19							Total Depend				
Total Claims	21							Total Claims				